

**VAGINAL SPERMICIDE**

DEFINITION	Vaginal spermicidal products have two components: a base or carrier such as gel, foam, creams, films or suppositories and a chemical that kills sperm. The agent used in the U.S. is nonoxynol-9 which is a surfactant that destroys the sperm cell membrane. Spermicides are often used with other barrier methods such as diaphragms and cervical caps.
SUBJECTIVE	May include: <ol style="list-style-type: none">1. LMP2. Medical, sexual, and contraceptive use history updated, as appropriate.3. No history of allergies to any component of the vaginal spermicide.
OBJECTIVE	May include: <ol style="list-style-type: none">1. Pelvic exam negative for abnormalities which would interfere with the use of spermicide.
LABORATORY	N/A
ASSESSMENT	Candidate for vaginal spermicide.
PLAN	<ol style="list-style-type: none">1. Review method and provide client education. Assess with client her individual risk for unintended pregnancy. There is an increased risk for failure if intercourse occurs 3 or more times a week, age less than 30, previous failure with spermicides or barriers and circumstances that make consistent use difficult including known drug or alcohol abuse. If a client is high risk for method failure, encourage her to consider other more effective methods or a combination of methods.2. Offer advance prescription of emergency contraceptive pills.

CLIENT EDUCATION	<ol style="list-style-type: none"> 1. Provide Client education handout(s). Review manufacturer's inserts. Review symptoms, complications, and danger signs. 2. Advise client that vaginal spermicides are available at the family planning clinic or over-the-counter as a suppository, jelly, cream, foam, sponge and film (see table below). 3. Review safer sex education, as appropriate. 4. Epithelial disruption can be associated with spermicide dose, delivery system or frequency of use. Caution clients who use spermicide frequently (twice a day or more), as doing so can increase the risk of STD's and HIV, if exposed. 5. Recommend that client return to clinic annually or as needed for problems. 			
	Type	Onset of Action	Duration of Action: There are no conclusive studies on how long a spermicide is fully effective	Spermicide
	Foam	Immediate	≥60 minutes	Nonoxynol-9
	Creams & Jellies			Nonoxynol-9
	- Single Use	Immediate	>60 minutes	
	- Reusable Applicator	Immediate	>60 minutes	Nonoxynol-9
	Suppositories	10-15 minutes	<60 minutes	Nonoxynol-9
	Film	15 minutes	3 Hours *Use 1 film for every act of intercourse.	Nonoxynol-9
CONSULT / REFER TO PHYSICIAN	No specific need to refer to physician.			

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References:

1. Hatcher, R.A., Trussell, J., Nelson, A. et al (2011) Contraceptive Technology. (20th revised ed.) Pp 391-405, New York: Ardent Media